

STATE OF SOUTH DAKOTA

STATE OF SOUTH DAKOTA DEC 1 0 2021 Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 300 f	Capitol, Flerie, SD	21301-3011	
1. TITLE OF NEWSPAPER Spring Field TI		2. DATE	7/20/21
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS		3B. ANNUAL SUBSCRIPTION PRICE \$ 42-45-55	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF			
(Not printers) PO BOX 465, Spring &	eld, Bon Ho	mme, SD 3	57062-0465
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE PUBLISHER (Not printers)	RS OR GENERAL BL	ISINESS OFFICES	OF THE
COTIGNA, BONHE	mme, 50	57059-0	388
6. FULL NAME OF PUBLISHER: PEDELLO L	NCZ		
7. OWNER (If owned by a corporation, its name and address must addresses of stockholders owning or holding 1 percent or more names and addresses of the individual owners must be given. It and address, as well as that of each individual must be given.	of total amount of stoc. owned by a partnership	k. If not owned by a c p or other unincorpor	corporation, the ated firm, its name
FULL NAME COMPLETE MAILING ADDRESS			
BaHPublishing, Inc P	abox 388,	Scotland	SD 57059
 KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M state. If more space is needed, list on back of this form. 	ORTGAGES OR OTE	IER SECURITIES (I	f there are none, so
	AVERAGE NO. CO	OPIES ACTI	JAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDI MONTHS	NG 15	ISSUED ST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	484		184
B.PAID AND/OR REQUESTED CIRCULATION	1.0		
Sales through dealers and carriers, street vendors, and counter sales.	135		35
Mail Subscription (Paid and or requested)	238		246
3. Paid Electronic Copies	19		19
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	392		400
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	6		6
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	2		2
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	400		408
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	50		37
2. Return from News Agents	34		39
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	484		484
Statement must be signed by Publisher, Business Man I swear that the statements made by me are true,	correct, and comp	olete:	
(Signature)	Tublisher (Title)		
State of South Dakota)	Sworn to before me this 3rd day of Sept, , 2021		
countrof Bow Homme)	Notary Public		
(Seal) Seal	My commission expires: 10 -24-21		

Notary Public South Dakota

Form: SOS REC UST 9/201